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## PATENT APPLICATION FEE DETERMINATION RECORD

Substitute for Form PTO-875

Application or Docking Number

10/7/19, 112

## CLAIMS AS FILED - PART I

(Column 1)

(Column 2)

SMALL ENTITY

OR

OTHER THAN  
SMALL ENTITY

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE (37 CFR 1.10(a))		
TOTAL CLAIMS (37 CFR 1.10(c))	minus 20 *	
INDEPENDENT CLAIMS (37 CFR 1.10(d))	minus 3 *	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.10(d))		

RATE	FEE
	\$
X \$	
X \$	
X \$	
TOTAL	

RATE	FEE
	\$
X \$	
X \$	
X \$	
TOTAL	

\* If the difference in column 1 is less than zero, enter "0" in column 2

## CLAIMS AS AMENDED - PART II

(Column 1)

(Column 2)

(Column 3)

SMALL ENTITY

OR

OTHER THAN  
SMALL ENTITY

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (37 CFR 1.10(c))	19	20	
Independent (37 CFR 1.10(d))	4	3	1
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.10(d))			

RATE	ADDITIONAL FEE
X \$ 25	
X \$ 100	
X \$	
TOTAL	
ADDITIONAL FEE	

RATE	ADDITIONAL FEE
X \$ 50	
X \$ 200	
X \$	
TOTAL	
ADDITIONAL FEE	

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (37 CFR 1.10(c))			
Independent (37 CFR 1.10(d))			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.10(d))			

RATE	ADDITIONAL FEE
X \$	
X \$	
X \$	
TOTAL	
ADDITIONAL FEE	

RATE	ADDITIONAL FEE
X \$	
X \$	
X \$	
TOTAL	
ADDITIONAL FEE	

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (37 CFR 1.10(c))			
Independent (37 CFR 1.10(d))			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.10(d))			

RATE	ADDITIONAL FEE
X \$	
X \$	
X \$	
TOTAL	
ADDITIONAL FEE	

RATE	ADDITIONAL FEE
X \$	
X \$	
X \$	
TOTAL	
ADDITIONAL FEE	

\* If the difference in column 1 is less than the entry in column 2, enter "0" in column 3

\*\* If the highest number previously paid for is 1105, SPACE is less than 20, enter "20"

\*\*\* If the highest number previously paid for is 1105, SPACE is less than 1, enter "1"

The highest number previously paid for (Total of independent is the highest number found in the appropriate column)

This form is to be completed by the applicant or the attorney-in-fact. The information is required to obtain or retain a benefit by the office which is the party to the proceeding. The information is not to be used for any other purpose. The information is not to be used for any other purpose. The information is not to be used for any other purpose.

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